FORM D

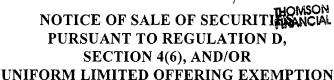
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UNITED STATES SECURITIES AND EXCHANGE COMNO Washington, D.C. 20549

FORM D

Expires: May 31, 2005 Estimated average burden

hours per response.....16.00



SEC USE ONLY					
Prefix	Serial				
DATE RECEIVED					
1					

Name of Offering (check if this is an amendment and name has changed, and indicate change.) Organizing subscriptions for PG Investors 1, LLC
Filing Under (Check box(es) that apply): X Rule 504 Rule 505 Rule 506 Section 4(6) ULOE
Type of Filing: New Filing Amendment NOV 2 (200)
A. BASIC IDENTIFICATION DATA
1. Enter the information requested about the issuer
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)
PG Investors 1, LLC
Address of Executive Offices (Number and Street, City, State, Zip Code) 1759 Sapphire Way, Sun Prairie, WI 53590 Telephone Number (Including Area Code) 608-239-8091
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices) same
Brief Description of Business
Invest in nPoint, Inc.
Type of Business Organization corporation
Month Year Actual or Estimated Date of Incorporation or Organization: OTT OTS Estimated Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State: CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C.

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION-

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6-02)

A, BASIC IDENTIFICATION DATA	
2. Enter the information requested for the following:	
• Each promoter of the issuer, if the issuer has been organized within the past five years;	•
• Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or m	ore of a class of equity securities of the issuer.
• Each executive officer and director of corporate issuers and of corporate general and managing partner	rs of partnership issuers; and
• Each general and managing partner of partnership issuers.	
Check Box(es) that Apply: X Promoter Beneficial Owner Executive Officer Direc	tor 🛛 General and/or Managing Partner
Early Stage Research, LLC	Managing Faither
Full Name (Last name first, if individual)	
1759 Sapphire Way, Sun Prairie, WI 53590	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter X Beneficial Owner Executive Officer Direct	tor General and/or Managing Partner
Lyche, John F.	Wanaging Latiner
Full Name (Last name first, if individual)	
1820 Ironwood Place, Onalaska, WI 54650	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter M Beneficial Owner Executive Officer Direct	tor General and/or Managing Partner
Mosher, George	· · · · · · · · · · · · · · · · · · ·
Full Name (Last name first, if individual) 4706 North Wilshire Road, Whitefish Bay, WI 53211	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: \square Promoter \square Beneficial Owner \square Executive Officer \square Direct Blade Ventures, LLC	tor General and/or Managing Partner
Full Name (Last name first, if individual)	
759 North Milwaukee, Street, Milwaukee, WI 53202	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direc	tor General and/or
Mathy, Scott P.	Managing Partner
Full Name (Last name first, if individual)	
3031 Wild Rose Lane, Onalaska, WI 54650	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	
Ward, David J.	Managing Partner
Full Name (Last name first, if individual)	
3309 Valley Creek Circle, Middleton, WI 53562	
Business or Residence Address (Number and Street, City, State, Zip Code)	
Check Box(es) that Apply: Promoter Beneficial Owner Executive Officer Direct	tor General and/or Managing Partner
Full Name (Last name first, if individual)	
Delta and Delta and Delta and Control Control Control	
Business or Residence Address (Number and Street, City, State, Zip Code)	

		11. The 1			В. П	NEORMATI	ON ABOU	T OFFERI	NG.			272 - 123 243		
1.	Has the	issuer sold	l. or does th	ne issuer ir	ntend to se	ll. to non-a	ecredited in	nvestors in	this offeri	ng?		Yes	No [X]	
	1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? Answer also in Appendix, Column 2, if filing under ULOE.													
2.									<u>\$10,000</u>					
2								Yes	No					
3. 4.									L					
commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a stat or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of suc a broker or dealer, you may set forth the information for that broker or dealer only.							he offering. with a state							
Ful	l Name (I N/A	Last name	first, if indi	vidual)										
Bus	Business or Residence Address (Number and Street, City, State, Zip Code)													
Nar	ne of Ass	ociated Br	oker or Dea	aler.									•	
1141	ne or Ass	ociated Di	oker or Dea	aici										
Star			Listed Has											
	(Check	"All States	or check	individual	States)	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	•••••	••••				All States		
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	
	IL MT	[NE]	IA NV	KS NH	KY NJ	LA NM	ME [NY]	MD NC	MA ND	MI OH	MN OK	MS OR	MO PA	
	RI	SC	SD	TN	TX	UT	VT	VA	WA	WV	WI	WY	PR	
Ful	l Name (1	Last name	first, if indi	vidual)					<u> </u>					
Bus	siness or	Residence	Address (N	Number an	d Street, C	ity, State, 2	Zip Code)							
Nat	ne of Ass	ociated Br	oker or Dea	aler										
													· 	
Sta			Listed Has											
	(Check	"All States	" or check	individual	States)				. 					
											•••••	∐ A⊓	States	
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID	
	IL	IN	IA NV	KS	CA KY	LA	ME	DE MD	DC MA	FL MI	GA MN	HI MS	ID MO	
			AZ IA NV SD		CA KY NJ TX			DE	DC	FL	GA	HI	ID	
Ful	IL MT RI	IN NE SC	NV	KS NH TN	NJ	LA NM	ME NY	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA	
	IL MT RI	IN NE SC	NV SD first, if indi	KS NH TN vidual)	NJ TX	LA NM UT	ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA	
	IL MT RI	IN NE SC	NV SD	KS NH TN vidual)	NJ TX	LA NM UT	ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA	
Bus	IL MT RI I Name (I	IN NE SC Last name	NV SD first, if indi	KS NH TN vidual)	NJ TX	LA NM UT	ME NY VT	DE MD NC	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA	
Bus	IL MT RI I Name (I siness or me of Ass	IN NE SC SC Residence	NV SD first, if indi Address (N	KS NH TN vidual) vidual	NJ TX d Street, C	LA NM UT	ME NY VT	DE MD NC VA	DC MA ND	FL MI OH	GA MN OK	HI MS OR	ID MO PA	
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Bus	IL MT RI I Name (I siness or me of Ass	IN NE SC Last name Residence	NV SD first, if indi Address (N oker or Dea	KS NH TN vidual) vidual) Number an	NJ TX d Street, C	LA NM UT	ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR	
Bus	IL MT RI I Name (I siness or me of Assites in Wh	IN NE SC Last name Residence sociated Br nich Person "All States	NV SD first, if indicated Address (No oker or Decay Listed Has	KS NH TN vidual) vidual) vumber an aler Solicited individual	d Street, Cor Intends States)	LA NM UT	ME NY VT Zip Code)	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	ID MO PA PR	

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS 😭 📜

1.	sold. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box \Box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security	Aggregate Offering Price	e ,	Am	ount Already Sold
	Debt			\$	
	Equity	\$ 70,000		\$	70,000
	🕅 Common 🔲 Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	\$.	\$	
	Other (Specify)	\$			
	Total	\$ 70,000		<u>\$_7</u>	70,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number		Do	Aggregate
		Investors 5		-	f Purchases 70,000
	Accredited Investors		- ,	Ψ	
	Non-accredited Investors		 -	<u>\$</u>	<u>0</u> 70,000
	Total (for filings under Rule 504 only)		_	\$	70,000
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.				
	Type of Offering	Type of Security		Do	ollar Amount Sold
	Rule 505	n/a		\$	0
	Regulation A		_	\$	0
	Rule 504	n/a	_	\$	0
	Total	n/a	_	\$	0
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees	************		\$	
	Printing and Engraving Costs			\$	
	Legal Fees			\$	
	Accounting Fees			\$	·**.
	Engineering Fees			\$	
	Sales Commissions (specify finders' fees separately)			\$	
	Other Expenses (identify)			\$	
	Total		<u> </u>	\$	0

b. Enter the difference between the aggregate and total expenses furnished in response to Par proceeds to the issuer."	offering price given in response to Part C — C t C — Question 4.a. This difference is the "adju	isted gross .	s_70,000
 Indicate below the amount of the adjusted greach of the purposes shown. If the amount check the box to the left of the estimate. The typroceeds to the issuer set forth in response to 	for any purpose is not known, furnish an est otal of the payments listed must equal the adju	imate and	
		Paymen Offic Directo Affilia	ers, rs, & Payments to
Salarics and fees	***************************************		🗆 \$
Purchase of real estate		\$	S
Purchase, rental or leasing and installation of	of machinery	s	[] \$
Construction or leasing of plant buildings a	nd facilities	s	\$
Acquisition of other businesses (including to offering that may be used in exchange for the issuer pursuant to a merger)	ne assets or securities of another		-
Repayment of indebtedness			
Other (specify): Investment			
Other (specify).			
Future Expenses and Member	r Distribution	s	<u> </u>
Column Totals	MITCH III III III III III III III III III I	\$	2 <u></u>
Total Payments Listed (column totals added)	[<u>25 70,000</u>
The second secon			A STATE OF THE STA
The issuer has duly caused this notice to be signed signature constitutes an undertaking by the issuer the information furnished by the issuer to any no	by the undersigned duly authorized person. If to furnish to the U.S. Securitles and Exchange on-accredited investor pursuant to paragraph	this notice is filed up to Commission, upon	
ssuer (Print or Type)	Signature	Date	/
PG Investors 1, LLC	Milleffher	1.//	9/03
Name of Signer (Print or Type) Adam J, Bock	Title of Signer (Print or Type) Research Manager, Early Stage Research, I	LC, Manager	